SUPPORTED CHILD CARE

SUMMATIVE EVALUATION REPORT

April 1995 to March 1999

Prepared for the Ministry for Children and Families

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Executive Summary

This report provides a summary of events over a four year transition period to Supported Child Care (SCC). On April 1 1995, the Governments of Canada and British Columbia launched Improved Access to Child Care, a four year, $32 million cost-shared agreement under the Federal Strategic Initiatives Program. As a result of this initiative, the provincial government was able to fund the activities associated with the transition to SCC; supporting the move from one service delivery framework (Special Needs Day Care) to another (SCC) over a four year period from April 1 1995 to March 31 1999.

The transition process, the resources developed over the four year transition period, and the establishment of SCC service delivery models throughout the province are described in this report. Documentation was reviewed and existing data sources were assessed to support the finding in this report. When necessary, follow-up interviews were conducted to augment the documentation. A complete list of References follows this report.

The following objectives were met during the transition:

- Models of well-supported inclusive child care systems were developed in most parts of the province.
- A provincial transition coordinator facilitated provincial transition planning and supported regionally-based transition planning through networks of support and information sharing.
- Training opportunities were created for Ministry staff, child care providers, and parents.
- A Support Guide was created as well as other materials such as the Enhancing Accessibility Resource Manual to assist child care providers and families in making decisions to best meet the needs of children requiring extra support.
- Standards and practices have been and continue to be developed for SCC.
- Support for inter-ministerial activities continued throughout the four year transition period.

This summary report outlines the process of the transition to SCC and the components that were implemented to meet the intended outcome to create an inclusive child care system for British Columbia. The report provides the background/context of the transition to SCC during the four years of the Child Care Strategic Initiative, as well as a brief methodology section. The remainder of this report addresses the six summative evaluation questions pertaining to SCC. These questions are as follows:

1. To what extent was a service delivery framework to meet the needs of children requiring extra support developed? Specifically did this framework:
    - contract for a supported child care transition project coordinator;
    - facilitate local transition planning process;
    - train staff, caregivers and parents;
    - create formal networks to share information and resources;
    - develop practices and standards for the integration of children with special needs;
    - develop a support guide and other materials to assist child care providers and families in making decisions on how best to meet the needs of individual children who need extra support; and
    - support inter-ministerial activities within the appropriate ministries.
2. Overall and to what extent did SCC achieve its expected outcome, to create a more inclusive child care system in BC where every parent has the same choices and every child belongs?
3. How many more children are participating in inclusive settings under SCC and how well are these children being served?
4. What is the capacity to provide inclusive child care through SCC and how has accessibility to inclusive child care been impacted.
5. What resources have been developed/devoted to supporting inclusive child care under SCC and what are the impacts of these resources?
6. Is the SCC model a cost-effective way of achieving the expected outcomes and are there more cost-effective methods of achieving the same outcomes?

This report includes a discussion of the issues and a conclusion that the transition to SCC and the components that were implemented during the transition period met the intended outcome. The intended outcome of the transition to SCC is to create a more inclusive child care system for British Columbia where every parent has the same choices and every child belongs.

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Section 1 - Introduction

1.1 Canada/British Columbia Child Care Strategic Initiative

On April 1 1995, the Governments of Canada and British Columbia launched *Improved Access to Child Care*, a four year, $32 million cost-shared agreement under the Federal Strategic Initiatives Program. The purpose of the federal initiative is to test new and innovative ways to reform Canada's social security system.

British Columbia is the only province in Canada to develop a child care initiative through Strategic Initiatives. The Strategic Initiative: *Improved Access to Child Care* is a federal-provincial cost shared program designed to pilot and evaluate innovative child care delivery models which will help to inform federal and provincial governments about the role of child care in the social security system.

The Government of British Columbia believes that by addressing the child care needs of working and student parents, job and educational opportunities will be more accessible for parents. To effectively work or study outside the home, parents require high quality, affordable and accessible child care. As such, child care is critical to government initiatives to strengthen the economy and reform the social security system.

Since 1992, the government of BC has worked with families, caregivers and communities to develop a strategy that encourages more quality, affordable, accessible child care. All projects funded through *Improved Access to Child Care* support this overall direction and the principles and objectives stated in the federal/provincial agreement.

Services developed and programs enhanced through the Child Care Strategic Initiative (CCSI) were designed to be consistent with the overall direction for child care services in British Columbia. Each project was intended to address at least one of the following core objectives:

- to improve the stability and quality of facilities and services;
- to increase the affordability for parents;
- to increase the availability of services and promote parental choice in the selection of the most appropriate child care arrangements for their families.

The CCSI is comprised of three main components:

- Community One Stop Access Centre
- Regional Delivery Models/Community Demonstration Projects
- Supported Child Care

1.2 Supported Child Care

In December 1994, the Government of British Columbia endorsed a new way to include children requiring some level of support in child care settings. The new direction required a shift in policies and practices from the previous Special Needs Day Care Program (SNDCP) to a new Supported Child Care (SCC), community-based family support program.

The overarching philosophy of the new SCC program emphasizes that:

- all families must have the same child care choices;
- some children need extra support to be included; and
- child care settings must be supported to ensure effective inclusion of all children.

The following principles guided the transition to SCC process and the development of a new service delivery model:

- inclusion,
- family-centred care;
- community-based services;
- individual planning; and
- a shared responsibility.

Rather than piloting the new service delivery framework, the Government of British Columbia chose to make the program

shift over a four year period (1995-1999). The transition to SCC was made possible through the four-year Canada/British Columbia CCSI.

Inclusion in the broader child care system would be achieved, in part, through increasing the supports necessary for the provision of a safe and healthy environment for children who require extra support. Supports included both those required by the child and those required by the child care setting.

The implementation of SCC was expected to provide improvements in the accessibility, quality and inclusiveness of child care options available to parents.

1.3 SCC Objective and Expected Outcome

The objective of the SCC component of CCSI was to develop a service delivery framework to meet the needs of over 3,000 children who were utilizing services under the SNDCP in British Columbia in 1995.

The expected outcome of the SCC component of the CCSI was to create a more inclusive child care system in British Columbia where every parent has the same choices and every child belongs.

1.4 Summative Evaluation Report

The intent of this report is to outline the process of the transition to SCC and the components that were implemented to meet the intended outcome of an inclusive child care system for British Columbia.

This report provides a summary of the activities that were implemented over the four year transition. It is divided into ten sections.

Section 2 provides the background/context of the transition to SCC during the four years of the CCSI. The impetus for this transition process began prior to the 1995, however the CCSI provided a means of supporting the transition process through a four year period. At the same time, a number of other significant changes took place within the province of British Columbia that may have had implications for the transition to SCC. Section 2 lays out the bigger provincial context within which the transition to SCC was occurring.

Section 3 is the methodology section. This section describes some of the evaluative tools that are referenced in this report and were used in addressing the summative evaluation questions pertaining to SCC.

The remainder of this report addresses the six summative evaluation questions pertaining to SCC. These questions are outlined in the following description of each section.

Section 4 addresses the extent to which a service delivery framework was developed to meet the needs of children requiring extra support. Specifically, the extent to which the framework:

- supported the coordination of inter-ministerial activities within the appropriate ministries to undertake the project;
- contracted for a supported child care transition project coordinator;
- facilitated local transition planning process;
- trained staff, caregivers and parents;
- created formal networks to share information and resources;
- developed practices and standards for the integration of children with special needs; and
- developed a support guide and other materials to assist child care providers and families in making decisions on how best to meet the needs of individual children who need extra support.

Section 5 addresses the following question: overall and to what extent did SCC achieve its expected outcome, to create a more inclusive child care system in BC where every parent has the same choices and every child belongs?

Section 6 identifies how many more children are participating in inclusive settings under SCC and how well these children are being served.

Section 7 reports on the capacity to provide inclusive child care through SCC and how accessibility to inclusive child care

has been impacted.

Section 8 identifies the resources that have been developed/devoted to supporting inclusive child care under SCC and assesses the impact of these resources.

Section 9 addresses the following questions: Is the SCC model a cost-effective way of achieving the expected outcomes? Are there more cost-effective methods of achieving the same outcomes?

Section 10 concludes with a summary of the events of the four years and the results of the analysis of the transition to SCC.

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Section 2 - Overview of the Transition to Supported Child Care

2.1 Background

The transition to SCC in British Columbia began in 1990, with a review of the Special Needs Day Care Program (SNDCP) administered through the Ministry of Social Services (MSS), due to increased demands on the program. An informal committee of MSS staff identified a need to have a clearer picture of the services provided in this program and to consult with parents about potential changes to the service delivery model. In the summer of 1991, a survey was conducted of service providers and MSS staff. The research identified disparities in service across the province . . . lack of clarity in terms of the program's objectives and a lack of consistency in terms of practice issues relating to eligibility and income testing.[1]

A consultation phase followed the research phase in which 1,300 people had the opportunity to express their views during community focus groups and through written submissions. In September 1992, the SNDCP Reference Committee was appointed to recommend changes to the SNDCP. The Reference Committee was comprised of parents, service providers, early childhood educators, and representatives from five provincial ministries.[2] This committee reviewed the input from the consultation process in order to respond to the concerns regarding the lack of consistency in service delivery across the province. Over the course of one year, the committee met six times (two days at a time) and reviewed several drafts of a report to the government. The final report, entitled, *Supported Child Care: The Report of the Special Needs Day Care Review in British Columbia* was submitted in December 1993. The recommendations of the Reference Committee were released to the public. After a year of further community consultation and public feedback, the government issued a response to the initial report entitled, *The Government's Response to Supported Child Care,*[3] in December 1994.

Both documents stressed the overall philosophy of SCC that:

- all families must have the same child care choices;
- some children need extra support to be included; and
- child care settings must be supported to ensure effective inclusion of all children.

The principles of SCC were identified as:

- inclusion;
- family-centred care;
- community-based services;
- individual planning; and
- a shared responsibility.

The main objectives of the SCC program were articulated as:

- a community-based family support program;
- equitable access to and participation in child care;
- support for families to maintain the integrity of families; and
- support to communities to respond to the child care needs of all.

2.2 Government Response

There were two areas in which the initial report on SCC and the *Government Response* differed. The original report on SCC stressed that parents who's children require additional support should enter the child care system in the same way as any parent. That is, they should pay the direct costs of the child care space. The ministry would pay for the extra supports required by the child and setting in order for that child to be included in the child care setting. This was a dramatic departure from the original policy under the SNDCP where, in most situations the ministry paid for 100% of the costs of the child care space and the additional supports required for the child to attend the child care setting. Under the SNDCP, one third of the children requiring extra support in the province attended specialized child care settings. The government contracted directly with the specialized centres to provide service.

The *Government Response* proposed a non income-tested (Special Needs Subsidy of $107 per month to offset the cost of the child care setting fees. That is, the family would pay the child care setting fee, but if their child was deemed eligible for the SCC program *[see a further explanation of eligibility under the Support Guide discussion which follows]* then they could receive the $107 payment. In some instances the $107 would cover the total child care fee (for some part time programs). If a child was attending a full day program then the $107 could be applied to the full cost of the child care fees and reduce what the family would be expected to pay. In such a situation, if the family required additional financial support and if they met the income text requirement, they could apply to the regular child care subsidy program for a portion of the balance of the fees. The ministry would continue to pay for the extra supports required by the child and setting in order for that child to be included in the child care setting.

The second area where the two reports differed was with regards to eligibility. The *SCC Report* proposed the use of a (support checklist to establish the child's need for service in an attempt to eliminate the need for a diagnosis to determine eligibility. Ministry policy stated (1996), that children must have one or more of the following disabilities to be eligible for the Special Needs Day Care program.[4]

- communication - child is deaf, hearing impaired, has no speech, or has a speech and language impairment.
- physical - child is blind or partially sighted, has an orthopedic impairment or other health impairments.
- intellectual - child has a mental handicap.
- emotional/behavioural - child has autism or is seriously emotionally or behaviourally disturbed.

The *Government Response* (1994) stated that At this point instead, we plan to develop a *Support Guide* that - like the checklist - will be used to help identify the supports needed, but not to determine eligibility.

With this framework in place, the government proposed moving forward with the transition to SCC. Other ministerial transitions were also occurring at the same time. In September 1993, the Ministry of Women's Equality was given overall responsibility for child care. The *Government Response* (1994) stressed that The Ministry of Women's Equality will ensure that the new SCC program is integrated into the broader child care system and builds upon the initiatives currently underway to strengthen the child care sector as a whole. The administration and management of the SNDCP/SCC program continued to reside with the MSS.

During the development of the original *SCC Report* through the SNDCP Reference Committee, five ministries (Ministry of Social Services, Ministry of Women's Equality, Ministry of Education, Ministry of Health, Ministry of Advanced Education, Training, and Technology) had representation on the committee and made recommendations for action through their ministries to support the move to SCC. The five ministries continued to be integral to the transition to SCC. Their participation in the transition process was to ensure action would be taken on the various recommendations.

This shared responsibility within government was intended to:[5]

- support child care providers in expanding and redesigning the current service delivery system;
- provide opportunities for existing service providers and special needs day care workers to develop new roles and

continue to work with children who need extra support; and

- ensure that the movement towards SCC did not negatively affect the financial viability of child care settings.

Finally, the *SCC Report* (1993) emphasized, and the *Government Response* (1994) reiterated, the need to maintain stability in the child care field as the transition proceeded.

2.3 Strategic Initiatives

On April 1 1995, the Governments of Canada and British Columbia launched *Improved Access to Child Care*, a four year, $32 million cost-shared agreement under the Federal Strategic Initiatives Program. The main intent of this Child Care Strategic Initiative (CCSI) agreement was to test a number of approaches which would:[6]

- improve the accessibility, affordability and quality of child care services for children and families; and
- ensure a more responsive, effective, efficient and inclusive system for child care in British Columbia.

The three components to the CCSI included Community One Stop Access Centres, Regional Delivery Models/Community Demonstration Projects, and SCC. As a result of these funds, the provincial government was able to fund the activities associated with the transition to SCC. From the outset it was clear that SCC was not a pilot project like the other components of Strategic Initiatives. The core programs of SCC were not eligible for funding through CCSI dollars. The Strategic Initiative funds were to support the move from one service delivery model (SNDCP) to another (SCC), over a four year period from April 1995, to March 1999.

2.4 SCC Transition Infrastructure

An overview of the budget begins to lay out the major components of the SCC transition. Each of the ministries involved in the transition process had specific amounts of money allocated to ministry-specific recommendations addressed in the *Government Response* (with the exception of the Ministry of Education). The entire budget projection for SCC was $8.226 million, cost-shared between the provincial and federal governments, over the four years.

The MSS had $3.008 million allocated towards:

- administration of the SCC budget;
- the contracting of the provincial transition coordinator;
- development of support materials, such as the Support Guide;
- travel and consultation within the province to the field and communities;
- funding to assist communities in their regional transition planning activities;
- orientation and training for MSS staff in any changes during the transition; and
- an analysis of the financial impact of the transition.

The provincial transition coordinator's tasks were to:

- work with communities and newly developed SCC Steering Committees to plan for a SCC service delivery model;
- collect and distribute information on existing SCC Programs to assist communities in their planning activities;
- develop a variety of tools - such as a handbook, videos and other training and orientation materials - to help communities make the transition to SCC; and
- develop the Support Guide with community consultation and support;

The overall goals for the Ministry of Women's Equality (MWE) included:[7]

- creating more choices that met the needs of working families;
- making child care available at a cost families could afford;
- ensuring child care was a safe and healthy place for all children; and
- finding creative new ways to better meet local child care needs.

In addition, the MWE was responsible for a budget involving $1.771 million. The focus of this budget was to develop a grants program that would provide funds to assist communities in making child care more accessible for children requiring extra support (later known as the Access Initiative) and to offer professional development/training events for the child care field in the area of SCC.

The Ministry of Health continued to provide early intervention services and licensing for child care settings. In addition, the Ministry of Health had $.730 million to develop a set of train the trainer manuals and to develop related training opportunities through a program called Partnerships Training in the following areas:

- Physio/Occupational Therapy;
- Challenging Behaviours;
- Family-Centred Care;
- Nursing Support;
- Inclusion; and
- Deaf and Hard of Hearing.

The Ministry of Skills, Training and Labour (currently the Ministry of Advanced Education, Training and Technology) was responsible for developing curricula and delivering training for SCC with a budget of $2.717 million. These included:

- offering introductory courses in SCC;
- additional offerings of post-basic courses;
- subsidization of student fees;
- the development of SCC consultant qualifications; and
- the delivery of SCC consultant training courses.

The Ministry of Education continued to work with school districts to strengthen transition planning for children who required extra support entering the school system.

2.5 SCC Steering Committees

In addition to inter-ministerial coordination, the *Government Response* (1994) stressed community involvement.

"All the ministries involved are committed to working in partnership with families and communities to ensure that the transition to SCC works in well- planned and coordinated phases. Communities will develop transition plans to guide the local process."[8]

This commitment on the part of government was to honour a "shared responsibility", one of the primary principles of SCC. The intent of community involvement was to respect the diversity of the province and the need for each community to create their own vision for SCC.

"Part of this process will be to ensure all communities establish fair and reasonable processes to identify qualified agencies interested in providing SCC services, and fully explore any possibilities for partnerships, collaborations or other linkages between early intervention and community child care services."[9]

The *Transition Handbook* to SCC (1996) emphasized this approach and urged communities to establish a SCC Steering Committee. The Handbook outlined the process to establishing a SCC Steering Committee, partners to consider as members of the Committee, and examples of terms of reference and vision statements of recently formed Committees. The SCC Steering Committees became community decision-making bodies in the regions for all SCC initiatives during the four year transition period, including the Access Initiative.

2.6 The Creation of the Ministry for Children and Families

The Ministry for Children and Families (MCF) was created in the fall of 1996, (a year and a half into the transition to SCC), as part of the government's response to the report of the Gove Inquiry into Child Protection.[10] This new ministry transferred more than 100 child, youth and family programs and services from five separate ministries into the new MCF.

The ministries involved in this transfer were the ministries of Health, Education, Skills and Training, Women's Equality, Social Services, and the Attorney General. Services that were involved in the transition to SCC were also included in the transfer with the creation of the new ministry. Those services included all SNDC programming from the MSS, all early intervention therapeutic services from the Ministry of Health, and all child care grant programs and initiatives from the Ministry of Women's Equality.

(As a result of this amalgamation of services, MCF became one of the largest service operations of the government, with the important task of protecting and supporting one of the province's most vulnerable resources, its children and families, adults challenged with mental handicaps and people suffering from various forms of addiction. As with any merger, there was a tremendous challenge in bringing together different organizational cultures, values and history.[11]

At the same time as many communities were focusing energies on the transition to SCC, they were faced with this much larger and significant transition of all government social services. The creation of MCF included the creation of twenty regions (later reduced to eleven in March 1999). Each regional office was headed by a Regional Operating Officer with the responsibility to meet the needs of the people in their communities.[12] This move to regionalization included the significant step of moving most programs, including child care grants from the central ministry office to the regional offices. While this encouraged community-based planning and responsiveness, it also stretched community partners' attention to broader social service child care issues while in the midst of planning for SCC. Responsibility for the CCSI budget and SCC activities management moved from the MSS to the MCF. The Child Care Section of the MCF identified regional Child Care Contacts and SCC Contacts and met with them via conference calls every two weeks regarding SCC and other child care issues.

2.7 Summary

This section provided the background and context of the internal review of the SNDCP within the MSS since 1991. This review identified a need and established a criteria for the transition from the SNDCP to a new SCC community-based family support service delivery framework. The CCSI provided a means of supporting the transition process through a four year period. During the transition period, five provincial ministries developed a number of supports to the process, including: hiring a provincial transition coordinator, an Access Initiative, and developing professional development/training for staff, caregivers and parents. At the same time, a number of other significant changes took place within the province of British Columbia which transferred more than 100 child, youth and family programs and services from five separate ministries into the new Ministry for Children and Families. Amidst these changes, the transition to SCC continued for four years to promote and support the principles of SCC provincially.

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Section 3 - Methodology

3.1 Overview

The intent of this summative evaluation report is to outline the process of the transition to SCC and the components that were implemented to meet the intended outcome of an inclusive child care system for British Columbia. The transition to SCC was monitored and evaluated in a number of ways. Various activities undertaken to support the transition process were tracked. The 49 SCC Steering Committees submitted their Community Access Plans, which identified how they would remove barriers to inclusive child care. Newly developed resources, including the Support Guide and the Enhancing Accessibility Resource Manual were evaluated to determine their effectiveness and to gather input for revisions. A case study of the transition to SCC was undertaken in four communities that were at different stages of implementation to examine their progress in developing the new SCC service delivery system. A triangulated survey of child care providers, parents and allied professionals was undertaken in four communities that had completed the transition to SCC.

The available documentation of the communities' process in making the transition to SCC was reviewed. Existing data sources were assessed which included a formative evaluation of SCC, reports on specific initiatives within the four year transition, ministerial briefing notes, and publications produced specifically for the transition. When necessary, follow-up

interviews were conducted with writers of the various evaluations of the SCC initiatives described in this report, to augment the documentation. A complete list of References is provided at the end of the report. Reports mentioned in this document may be found under separate copy and are not appended to this report.

3.2 A Case Study of Four Communities

A case study of the transition to SCC was undertaken in four communities that were at different stages of implementation, to examine their progress in developing the new SCC service delivery system. The case study showed that despite their disparities, the local Steering Committees encountered similar challenges and used common strategies to achieve success.[13] The findings of this study emphasized the differences and commonalities among communities as they engaged in the transition planning process. It was not intended to assess the effectiveness of the transition nor the new program's ability to meet the needs of children and families. It was undertaken to examine the transition process of communities in moving towards the implementation of SCC.

3.3 Supported Child Care Implementation: Regional SCC Contacts

In the fall of 1997, the MCF commissioned an evaluation of the transition process within the new ministry structure, and the establishment of the regional SCC positions.[14] In *SCC Implementation - A Summary of Discussions with SCC Contacts* (Erickson Associates, January 1998) the evaluator consulted with the SCC Contacts to determine how the transition was progressing in each region of the province. A universal support for the principles and philosophy of SCC within the ministry was noted. Some of the issues raised included:[15]

1. Lack of consistency in the SCC consultant position across the province.
2. Lack of consistent systems to facilitate the administrative work of SCC on a ministry level.
3. Lack of consistency in the interpretation of the eligibility criteria across the province.
4. Frustration with the implementation of the subsidy system and the $107 payment.
5. Lack of training for MCF staff to deal with labour relation issues.
6. A shift in the social worker's role from less client contact to more administrative functions.
7. Difficulty maintaining ministry-directed implementation time lines on a regional level.

A second phase of consultation with the regional SCC Contacts, SCC *Implementation - Reports for Regional SCC Contacts*[16] (Erikson Associates, May 1998) addressed:

- eligibility issues for the SCC program;
- funding;
- special needs subsidy;
- service delivery models; and
- labour relations questions.

The report provided information on the transition and related issues from the perspective of staff within the MCF. Highlights from the report include:

- "eligibility for SCC services would be best determined not by a medical diagnosis or disability 'label' but by an assessment of whether the child needed extra supports to be welcome in a typical child care setting."[17]
- a summary of payments for support costs across the province would be helpful in providing consistency.
- a recommendation for consistency in determining entitlement for SCC services to facilitate accessing services for those families that move across regions within the province.

3.4 Surveys of Parents, Child Care Providers and Allied Professionals

The MCF contracted with Focus Consultants[18] to assess the experiences and satisfaction with SCC in four communities through three sets of respondents: parents of children requiring extra support, child care providers, and allied professionals. The purpose of the survey was to assess the accessibility, quality and inclusiveness of child care options under SCC. The surveys were conducted from mid-November 1998, to early February 1999. The four communities selected for the study

varied in size, and in the number of families served through the SCC Program (eg. 32 families in Langley and 127 families in Campbell River). One community had been providing a SCC service delivery model since 1989 (Campbell River), six years prior to the start of the transition to SCC. Another community (Smithers/Hazelton) had just begun delivering SCC in the fall of 1998. This survey confirmed a high degree of satisfaction on the part of the three types of respondents with regards to access to SCC services, the quality of services, the responsiveness of individuals involved in SCC, and in attitudes towards inclusion.

3.5 Summary

These surveys are examples of some of the materials reviewed in preparation of this report. The vastness and variety of documentation is captured in the references at the end of the report. All materials verify the process of the transition to SCC and the components that were implemented to meet the intended outcome of an inclusive child care system for British Columbia.

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Section 4 - Outcome: To Develop a Service Delivery Framework

4.1 Overview

This section reports on the extent to which a service delivery framework was developed to meet the needs of children requiring extra support. Specifically, the extent to which specified activities were undertaken to meet this goal are discussed. The following activities were identified in the Canada/British Columbia CCSI agreement as central to the development of this framework:

- support inter-ministerial activities within the appropriate ministries to undertake the project;
- contract for a supported child care transition project coordinator;
- facilitate local transition planning process;
- training staff, caregivers and parents;
- create formal networks to share information and resources;
- develop practices and standards for the integration of children with special needs; and
- develop a support guide and other materials to assist child care providers and families in making decisions on how best to meet the needs of individual children who need extra support.

This section of the report describes each of these activities in supporting the development of the new SCC framework.

4.2 Support Inter-ministerial Activities

The *SCC Report* (December 1993) was based on extensive consultation with community partners and with five ministries (Ministry of Social Services, Ministry of Women's Equality, Ministry of Education, Ministry of Health, and Ministry of Education, Skills, and Training). The *Government Response* (December, 1994), committed the province of BC to ongoing ministry partnerships outlined in the *SCC Report.* The signing of the CCSI Agreement (April 1995), itemized objectives that involved the continued involvement of the five ministries. The ministerial Child Care Policy Team formed a sub-committee comprised of representatives from five ministries involved with SCC to coordinate the transition from the SNDCP to SCC. Representatives of the five key ministries met monthly from April 1995 to September 1997. The provincial transition coordinator, under contract with the MSS, was a member of the sub-committee. The SCC sub-committee met less frequently after the provincial transition coordinator left her position in September 1997. The Child Care Policy Team continued to oversee the transition to SCC. With the description of the objectives that follow in this report, the support of inter-ministerial activities is evident.

4.3 Contract for a SCC Transition Project Coordinator

During 1995, the first year of the transition, the provincial transition coordinator was hired by the MSS to head the SCC Transition Project (Province, BC, 1996). The focus of the SCC Transition Project was on:

- public education regarding SCC;
- distribution of written materials, such as the first draft of the Support Guide;
- two issues of the SCC newsletter;
- the development of the Transition Handbook to put community planning concepts within a SCC perspective; and
- linking with primary partners around SCC issues.

From April 1995, to September 1997, the SCC Transition Project focused on raising public awareness regarding SCC. This was primarily accomplished through the activities of the provincial transition coordinator. Her activities included public speaking engagements throughout the province, facilitation of community forums on SCC, and the production of two issues of the SCC newsletter in the first year. The *Transition Handbook* was developed which provided community planning guidelines and practical suggestions on community planning that linked with the principles of SCC,[19] such as establishing a committee, defining terms of reference, and developing a vision statement, with examples from community steering committees already in place. Two hundred copies of the Transition Handbook were distributed to MSS staff, SCC Steering Committees and other interested partners in the transition process.

In the first year, the provincial transition coordinator traveled throughout the province and visited 59 communities, spoke at 41 community forums on SCC, attended 172 meetings related to SCC, visited 75 child care settings (specialized and inclusive community-based settings), and handled 1,350 phone calls regarding SCC.

The creation of the provincial transition coordinator position was described as a highlight of the SCC Transition Project and a wonderful support.[20] The provincial transition coordinator acted as a liaison between the provincial government and communities, gathering feedback from the regions and relaying it back to the provincial government (MSS).

4.4 Facilitate Local Transition Planning Processes

Over the period of 1995 to 1996, communities hosted community forums on SCC, established Steering Committees, in some instances contracted for community facilitators, and worked on creating a community vision and action plan for an inclusive child care system. The time frames of the creation of these Steering Committees spanned from January 1995, to the fall of 1996, in some communities. Forty-seven Steering Committees had become active by the fall of 1995. Two additional steering committees were formed in the spring of 1996 bringing the total to 49.

Geographic barriers (great distances between communities) and hazardous weather conditions throughout the winter months often prevented members within some regions from getting together. Maintaining communication links was an ongoing challenge. Communication barriers also plagued the Steering Committees on a provincial level. It was recognized that linkages among the Steering Committees and with the larger provincial planning process was crucial. In order to support this process, a total of five teleconference calls occurred every 2-3 months. At any one time there were up to 40 active lines involved, with close to 100 people representing SCC Steering Committees and regional MSS staff. All MSS regions were represented and brief summaries of the community planning activities around the transition to SCC were provided.

The following types of issues and solutions were shared on the calls:[21]

- Ideas and ways to link community SCC Steering Committees with the provincial process and to improve communication channels;
- Concerns raised by all representatives regarding the lack of information around planned joint training opportunities;
- Managing current specialized contract influences on the community planning process and/or conflict between them, MSS, and/or other community partners;
- Financial implications on these contracts and the community planning process;
- Addressing fears that SCC meant an end to the specialized child care settings;
- Conflicts at community planning tables with specialized contracted agencies and what the nature of these conflicts were;

- Strategies used to create healthy working relationships at SCC steering committee tables;
- Combating fears around inclusion at the Steering Committee tables and the polarization of those working in specialized settings and those in community-based settings;
- Describing needs/requirements to create responsible financial action plans in relation to the community plans.

Lack of clarity around provincial initiatives (eg. such as training events and funding progra were often confusing for Steering Committee members and their regional ministry representatives. The teleconference calls were one way in which the provincial government chose to address the geographic barriers and issues around consistency in interpretation of initiatives. Participants on the teleconference calls were encouraged to take issues back to their Steering Committees and gather input, comments, and questions to offer during the discussion of these issues. Committees were also encouraged to designate a spokesperson for the community during the conference calls.

To facilitate the local transition planning process, a number of steps were taken, including: the identification of SCC Contacts in each of the 20 regions; the creation of the SCC Provincial Resource Team; and the development of the Access Initiative. Each of these components is described below.

4.4.1 MCF SCC Contacts

In response to the creation of the new Ministry for Children and Families (MCF), and the regionalization of services for children and families, the MCF identified the need for a regional staff person to become the contact point for information about SCC. They were referred to as the SCC Contacts.

A report on the *SCC Implementation* (Erickson Associates, January, 1998) summarized a discussion with SCC Contacts throughout the province. The report noted universal support for the principles and philosophy of SCC within the MCF. Some of the issues raised by the regional staff included:[22]

- Lack of consistency in the SCC consultant position across the province;
- Lack of consistent systems to facilitate the administrative work of SCC on a ministry level;
- Lack of consistency in the interpretation of the eligibility criteria across the province;
- Frustration with the implementation of the subsidy system and the $107 payment;
- Lack of training for MCF staff to deal with labour relation issues;
- A shift in the social worker's role from less client contact to more administrative functions; and
- Difficulty maintaining ministry-directed implementation of time lines on a regional level.

A second phase of consultation with the regional SCC Contacts, resulted in a report entitled *SCC Implementation - Reports for Regional SCC Contacts.*[23] In this report program issues for ministry staff were described in more detail and were addressed through working groups with the SCC Contacts. The main topics addressed in the working groups were:

- funding;
- special needs subsidy;
- service delivery models; and
- labour relations questions.

The reports on each of these topics confirmed the inconsistencies with implementation of SCC throughout the province. SCC was described in the following way,[24]

The SCC program is not so much a new program with new resources, but the reshaping of an existing program and the reallocation of existing resources with a temporary infusion of resources to help with the transition and to enhance existing service sectors.

This report confirmed the need for support to the regions throughout the remainder of the transition to SCC. As a result, the SCC Provincial Resource Team was established.

4.4.2 SCC Provincial Resource Team[25]

In May 1998, a SCC Provincial Resource Team (PRT) was established to assist regions to make the transition to SCC. The team consisted of two facilitators, a parent advocate, a financial management consultant, a therapy consultant, and ministry staff. Regional issues that delayed some regions from making the transition to SCC included:

- staff changes and lack of continuity for parents and service providers due to ministry reorganization;
- contract and program restructuring which resulted in delays in planning for the transition to SCC and eroded partnerships with community agencies;
- lack of clear direction regarding SCC policy;
- labour relation issues related to regional SCC service delivery models; and
- lack of support and training for regional contract managers in the areas of contract negotiations and monitoring.

The PRT provided consultation to 13 communities. The support provided depended on what was identified and requested by the regional MCF staff. It included:

- facilitation of meetings with SCC Steering Committees, MCF regional staff, community agencies to air concerns and successes, to determine SCC models, to negotiate contracts;
- assistance to regional MCF staff in establishing positive working relationships with parents, agencies and community partners;
- assistance to MCF regional staff and SCC Steering Committees to establish Terms of Reference and to develop skills in collaborative planning and group dynamics;
- the development of a guide for Steering Committees in the key principles of SCC;
- the development of a questionnaire for parents and caregivers to provide input to and to determine their issues with the implementation to SCC;
- identification of barriers and solutions to the implementation of SCC;
- provision of follow-up support to MCF regional staff through teleconferences;
- deliverance of the Partnerships Training packages throughout the province; and
- financial management support through a review of issues, a review of financial statements, development of funding models, assistance in contract negotiation and monitoring.

The PRT will continue to support regions that need assistance to develop individual regional plans with an implementation date of August 31, 1999.

4.4.3 Access Initiative

When the budget for the transition to SCC was first established, the MWE was responsible for $1.771 million to develop an Accessibility Grants program. The intention of this grant program was to provide funds to the child care sector so they could make child care settings more accessible for children requiring extra support.

Members of SCC Steering Committees expressed concerns that the majority of practitioners would ask for wheelchair ramps and bars on walls in washrooms in order to make their settings more accessible. The first concern was that physical adaptations to child care settings only implied a narrow definition of a child requiring extra support. The second concern was if the focus of the grant program was to only address physical adaptations to child care settings then $1.771 million would not meet the physical needs of all the child care settings in the province.

The Access Initiative (as the grant program came to be known) allocated funds to each SCC Steering Committee. (This was to be used to develop a community access plan and to address identified needs in the area of attitudes, skills and knowledge.[26] Once committees had assessed people (focusing on attitudes, skills and knowledge), programming and physical needs for their community-based settings, then they could develop a Community Access Plan. Priorization sheets were then categorized into "no cost", "low cost", "moderate cost" and "high cost" solutions.

In 1996/97, regions were allocated $8,000 for each SCC Steering Committee. Each committee decided, with input from their community, how to spend the money on developing a Community Access Plan. As a result, some communities decided they wanted to contract a facilitator to develop the plan for them. Many of the ideas generated by the Steering

Committees focused on addressing attitudes, skills, and knowledge around inclusion issues as the primary need in making child care more accessible. Some ideas generated to address these issues were to put on workshops, supplement and make resources accessible on inclusion strategies for child care providers, and/or pay for some child care providers to attend a conference on inclusion.

The Community Access Plans assisted Steering Committees to determine community needs for two years in the following areas:[27]

- Determining what was required by the people in the community to address inclusion issues, in the area of attitudes, skills, and knowledge through workshops and training opportunities.
- Determining what was required to support the practice of the people who have included children requiring extra support into their child care settings, through supplementing resources and equipment;
- Determining what was needed within the places that include children requiring extra support, through modifications to the physical environment.

The Steering Committees provided reports on how their funds were spent. These dollars supported a great many regional workshops and symposiums in communities that addressed attitudes, skills, and knowledge. In the remaining two years, 1997/98 and 1998/99, each Steering Committee received $11,000 annually to continue the planning process and to undertake activities related to accessibility issues and inclusion.

A summary of the Access Plans and initiatives over the two years was included in the *Every Child Belongs* SCC newsletter, Issue 3, 1998. The newsletter was funded during the last half of the transition to report on community planning activities during the course of the transition to SCC. A summary of some of the highlights of the Community Access Plans included:[28]

- production of TV ads for inclusive child care
- workshop offerings on inclusive child care practices
- completion of an inventory of existing resources
- establishment of a sharing system for resources
- provision of interest-free loans for the purchase of equipment and materials for structural renovations
- purchase of a portable wheelchair ramp
- installation of handrails in bathrooms
- development of support groups, brochures and service directory to inform and empower families
- development and distribution of kits explaining how to make low/no cost changes
- provision of a volunteer support program to after-school child care programs
- building change tables and other adapted furniture required by some child care settings funding of substitutes while parents train child care providers in how best to work with their children.

A follow-up report, *Taking Down the Barriers: A Final Report on the BC Access Initiatives* (Irving and Young, 1999) describes the results of the Access Initiative and the impacts on attitudes, equipment and facilities. The report was completed in March 1999. Part of the report includes an extensive inventory of all projects undertaken through the Access Initiative. The inventory will be distributed to MCF regional offices.

4.5 Training Staff, Caregivers and Parents

A number of training initiatives were undertaken to support the transition to SCC. Training was specifically developed for and targeted to ministry staff, child care providers, and SCC consultants. Parents were invited to attend many of the training and professional development events, though few participated.

4.5.1 Training for SCC Consultants

One way in which a shared inter-ministerial responsibility was encouraged, was through a joint training event between (the then) MWE Child Care Support Program staff [now known as Child Care Resource and Referral - CCRR] and (the then) MSS funded SCC consultants in March 1996. It grew out of the annual Child Care Support Program training offered

through the MWE and the desire to upgrade their knowledge base around SCC issues. The shared client base of child care providers and SCC consultants provided common ground for joining the two programs together for a training session. The training tended to be practice-oriented. It focused on evaluating child care programs and their capacity to incorporate more specialized techniques for working with children requiring extra support, into everyday child care routines. Enhancing consulting skills with parents and child care providers was also a focus.[29]

Follow-up surveys were sent out one year after the joint training session to assess the utility of the training based upon the actual experiences of people in the field, as opposed to participant predictions on how useful the tool would be to their work.[30] One of the sessions focused on training in the use of a tool (EC-SPEED). In general, the EC-SPEED training session was a worthwhile venture. The majority of respondents felt it was a useful tool for assessing the inclusiveness of a child care setting. The second training session Working Together for Inclusion was rated as being only somewhat helpful in promoting a sense of community ownership over the creation of inclusive environments.[31] Participants indicated that it did not assist in assessing a child's extra support needs nor in the accessibility of child care settings. The focus was more on family/professional partnerships.

4.5.2 Training for Ministry Staff[32]

Training for Ministry social work staff and regional supervisors was in the form of meetings to discuss planning towards SCC. In May 1995, District Supervisors (then of MSS) met for a day-long discussion about the history of SCC and some transition guidelines around community planning. In the fall of 1996, Area Managers and District Supervisors met to discuss emerging issues in their regions related to the transition to SCC, and future policy development. Travel and meeting costs were subsidized.

In January 1997, MCF staff had a meeting with representatives from each of the 47 SCC Steering Committees, to problem-solve some of the issues related to SCC that had arisen during the first two years of the transition. Participants provided suggestions to the headquarters staff of the MCF for support for the last two years of the transition. All participants' meeting costs were fully subsidized.

The ministry meetings provided opportunities for planning and discussion rather than providing specific training. However, participants learned through networking with other community representatives and regions, hearing similar and differing issues, and how those issues were being addressed.

A training opportunity for Regional Child Care Contacts and Regional SCC Contacts was provided in August 1997. Child Care Services Regionalization Training Sessions provided information on CCSI initiatives including SCC transition activities. In addition, training on outcomes for some of the SCC activities during the transition were offered at the CCRR Symposium SCC Track in February 1999.

In February and March of 1999, all SCC consultants and MCF social worker staff involved with SCC, received training in the use of the Support Guide. The Support Guide Handbook was mailed in advance in January 1999, for consultants and social workers to preview and to become familiar with the revisions and the process that would be stressed throughout the training. There were six two-hour training sessions delivered via video conferencing to all regions of the province.

4.5.3 Professional Development for Caregivers

From May 1996, to April 1998, some SCC transition funds were used to support the development of an Infant Development/SCC/Early Intervention stream at the Early Childhood Educators of B.C. (ECEBC) annual professional conferences. The same presenters of the training for SCC consultants and Child Care Support Program staff in March 1996, presented their workshops at the ECEBC Conference in May 1996, to reach a much broader audience. Six months following the May 1997 ECEBC conference, a survey was conducted to determine the efficacy of these supplementary workshops in promoting professional development.[33] The majority of respondents were satisfied with the conference, reporting, an excellent start, great, and quite a variety [of workshops] were presented.

Professional development of caregivers in the form of regional and local workshops on SCC topics were advertised in regional agency newsletters and often sponsored by CCRR and/or SCC programs. Workshops were subsidized through Access Initiative funds.

4.5.4 Post-Secondary Training for Caregivers

In addition to the professional development activities, the [then] Ministry of Education, Skills and Training (MEST), in collaboration with the MWE was committed throughout the transition to SCC to:

- ensure that all training materials developed for the post-secondary system were available as resources for professional upgrading related to SCC;
- review the existing early childhood education (ECE) post-basic Special Needs program, available throughout the province, to ensure that it reflected current best practice related to inclusion; and
- explore the need to increase the availability of post-basic Special Needs courses, so that practitioners holding an ECE basic certificate in infant/toddler care could have access to specialized training.

The MEST made CCSI funds available to local colleges to provide training in inclusive child care practices, planned in conjunction with other initiatives in communities. These courses were available for credit or not-for-credit. The intent was to enhance the practice of a cross-section of child care providers.

In June 1995, the MEST requested submissions of proposals for introductory SCC courses. The following criteria were provided:

- course offerings planned in consultation with community partners;
- course offerings planned in consultation with a SCC Steering Committee (if one exists);
- course content to reflect the principles of SCC;
- planning to consider the needs of all potential students in the regions served by the college interested in SCC;
- training to be available to students on a non-credit basis, regardless if they meet the post basic or diploma program entrance criteria;
- subsidization of SCC courses for students, in recognition that the cost of further education can be a barrier to professional development.

Each of the eighteen post-secondary institutions involved in offering SCC training were required to submit a year-end report to the MEST on the planning process, course statistics (hours offered, locations, and costs), student participation and outcomes, and expenditures (student subsidy and overall cost).

The new flexibility of entry into workshop courses offered through colleges resulted in expanded opportunities to receive training and professional development in inclusive practices. Innovative delivery models were proposed (e.g. Northwest Community College's summer institute, University of Victoria's interactive television distance education course with North Island College and University College of the Fraser Valley). As well, a new course model was established to train individuals to be SCC support workers/assistants through Okanagan University College in Kelowna.

Training through the post-secondary institutions continued through the four year transition process. Highlights of the 1997/98 evaluation from three colleges, Northern Lights College, North Island College, and University College of the Fraser Valley are reported below.

The students who responded to the Northern Lights College Early Childhood Education Special Needs program gave an overwhelming endorsement.[34] The students enrolled in the program are primarily already employed in and committed to the child care field and see a need to both be better credentialed and better trained to cope with the increasing diversity of problems presented by children in their care. Students on busy schedules also commended the flexibility offered to them.

During the period from January 1997, until May 1998, North Island College offered six different courses, each seven weeks duration. These courses were required to complete a SCC Certificate Program. The courses were offered simultaneously in Port McNeill, Campbell River, Courtenay, and Port Alberni.[35] The majority were taking the courses to pursue more training for professional development or further credentials towards a diploma in Early Childhood Care and Education. The majority were employed in some form of child care.

The University College of the Fraser Valley offered twelve SCC courses through Continuing Education and Training.[36] Two of the courses were delivered by interactive television linking with North Island College and the University of Victoria. Some of the courses were delivered at the Abbotsford campus, while others were offered in Chilliwack, Mission, and Hope.

As with the results from the North Island and Northern Lights evaluations, students reported that they did not take these courses primarily to assist them in finding employment. Students were mainly interested in taking the courses for professional development purposes or to pursue further courses in their chosen field. The majority of students felt that taking the courses increased their confidence or willingness to care for children requiring extra support and improved the quality of care they would provide.

Those colleges that developed workshops on inclusion attracted large numbers of participants. For example, Camosun College, in the Capital Region developed a workshop series on Preparing for Inclusion that attracted 85 participants in its first year and 117 in its second year of delivery. Capilano College offered a series of workshops on topics ranging from Reggio Emilia, Sibling of a Child with Disabilities, The Challenging Child, Signing, and the Volcano in Day Care. The workshops were held in locations in North Vancouver, Sechelt, and Squamish, attracting 150 participants. The College of the Cariboo provided fourteen, three-hour sessions on Individualization and Inclusion, Children as Individuals, Play, Programming, Report Writing and Developmental Assessment, Partnerships with Parents and Professionals. These were held in four sites, including Williams Lake, 100 Mile House, Kamloops, and Merritt, with a total of 74 people attending. Forty-nine of the 74 completed all sessions and were able to apply for credit in an Early Childhood Care and Education course through the college. Most colleges provided a similar format of workshop offerings that could be applied for credit in Early Childhood Care and Education.

4.5.5 Partnerships Training[37]

The premise of the Partnerships Training packages was that practitioners could benefit from additional training to work effectively with children who require extra support. It was also considered useful for child care providers to establish partnerships with service providers (therapists, nurses, mental health workers and family support workers) within their communities. Providing training which enhances partnerships assists in the delivery of a more inclusive system of care for children who require extra support.

The following training packages were developed:

- Partnerships in Speech and Language (developed prior to SCC, in 1993)
- Partnerships in Addressing Challenging Behaviour
- Partnerships in Family Support/Family Centred Practice
- Partnerships in Occupational Therapy and Physiotherapy
- Partnerships in Nursing Support
- Partnerships in Supporting Children who are Deaf and Hard of Hearing
- Partnerships in Inclusion

All of the Partnerships Training packages were available for training of trainers in September 1997, with the exception of Supporting Children who are Deaf and Hard of Hearing (Spring, 1998) and Inclusion (Winter, 1999). All Partnerships Training packages had a feedback sheet to be filled out by the participants who completed the training. This feedback continually informed the development of the Partnerships Training programs for content and appropriateness of workshop activities for the participants. A follow-up survey of the participants was administered.[38]

The feedback from the *Partnerships Project - Follow-up Survey: Participants*[39] indicated that the Partnerships Training packages effectively met the areas addressed in the survey. Self-ratings of participant's level of knowledge after the courses were generally high, suggesting learning gains. Many participants were able to take the new ideas from the training and transfer them into practice in their work. This transference of ideas also prompted them to recommend changes in the way their settings responded to the needs of children and families. The lack of time and money were cited as barriers to change. Creativity and innovation assisted respondents in overcoming these barriers by trying out new ideas and skills. Other key impacts of the training were the opportunities to form linkages with other professionals in the community, to learn about community resources, and to develop ongoing working relationships with a wide range of individuals who work with children requiring extra support.

4.6 Create Formal Networks to Share Information and Resources

A Planning Meeting was held in January 1997. SCC Steering Committees were invited to send two representatives. They

were encouraged to send one parent committee member. In addition, one ministry staff person per Steering Committee was involved. Members who attended the meeting were responsible for sharing materials and information obtained at the meeting with their SCC Steering Committees.

The Planning Meeting had three main purposes:[40]

- To meet with other representatives from Steering Committees around the province, to share information and resources, and to learn from each other.
- To attend discussion groups to gain information and to provide input into further provincial planning for SCC.
- To gain more information on the Access Initiative for the next two years.

At this two-day meeting, it was announced that the provincial transition coordinator's contract would not be renewed after March 31 1997. Ministry headquarters' staff became concerned that the coordination of SCC within the MCF would not be in place internally by April 1st 1997. The contract was then renewed from April 1 until the end of September 1997, on a part-time basis. It was hoped that such a move would create some ministry ownership by embedding the coordination of the new service delivery within a ministry position rather than just through a contracted short-term position. The provincial transition coordinator remained in the position completing a third newsletter, a paper on SCC training, and continuing to travel around the province, and by remaining as a main contact for the transition through the establishment of a toll-free line.

In order to coordinate provincial and regional information sharing of SCC, a new newsletter format that involved more community-based input was developed, as well as a brochure explaining SCC. There were two inserts to the brochure - one for parents and one for child care providers. A SCC poster was created in multiple languages promoting Every Child Belongs, the new slogan for SCC.

Continued support for provincial SCC community planning involved a two-day meeting in October 1997, with Steering Committee representatives and MCF staff. They continued with the planning and networking that had taken place in January 1997.

4.7 Develop Practices and Standards for SCC/

4.7.1 Policy Development

The last year of the CCSI SCC transition included increased activity in the areas of policy development specific to SCC and within the broader scope of the MCF. A policy reference group was established in October 1998, to gather input from service providers and families regarding policy development. The group had regular meetings and conference calls. The final meeting was held at the beginning of March 1999. A training/orientation session was held for MCF staff in December 1998, which provided an opportunity for field staff to identify outstanding policy issues. Work began on an initial draft of SCC policy, taking into account input from the policy reference group, as well as MCF staff. It is expected that the SCC policy will be completed in the spring of 1999.

4.7.2 SCC Consultant Competencies

In response to the *Government's Response to SCC* (December 1994), the MEST committed to build on existing child care training programs and other competencies in order to qualify someone to provide consultative services for the SCC Program.[41] In addition, the Multi-Lateral Task Force on Training, Career Pathing and Labour Mobility in the Community Social Service Sector in British Columbia, was established in 1995 to ensure coordination of planning, development, implementation and evaluation of all training.[42] In response to this recommendation, the MEST stated that further discussion was needed to more clearly identify the scope and content of required training for SCC consultants.

In early 1996, funding was provided to conduct research on the provision of consultative services and prerequisite qualifications for those providing SCC consultation services. The *Needs Analysis for the Provision of Consultative Services in Supported Child Care* project had five objectives.[43]

- To identify the values, knowledge and skill sets that would qualify individuals to provide the consultative services envisioned to implement SCC.
- To identify and review relevant training available in BC which could be drawn on to prepare providers of these

consultative services.

- To review relevant qualification mechanisms and training in other jurisdictions.
- To identify training gaps.
- To present potential models to address identified gaps, and strategies to ensure qualified individuals were available to fill consultative roles.

Direction to the project was provided by an Advisory Committee made up of ministry representatives and community partners. The *Needs Analysis* included a literature review and key informant interviews with researchers and experts in the field of child care and early intervention. The *Needs Analysis* responded to the five key objectives and provided a list of nine recommendations. The recommendations included that:

- The provincial government adopt a definition of a SCC consultant as outlined in the report.
- The provincial government develop competencies for SCC consultants.
- A standard core curriculum be established for SCC consultant training.
- The SCC consultant certification program be developed to ensure transferability.
- Clear entry level requirements be established.
- A prior learning assessment strategy for the SCC consultant be developed.
- Current SCC consultants be (grandparented and through a prior learning assessment determine further training needs.
- Facilitate links between pre service and in service training.
- All SCC Steering Committees receive the final report for consideration and feedback.

The MEST responded by involving the SCC and Infant Development (ID) sector in a process to identify competencies for SCC and ID consultants, in February 1998.

A Steering Committee for the ID/SCC Consultant Occupational Competency Analysis met from January to June 1998, to learn about the occupational analysis process and to provide input into the development of the project work plan and final draft of the Framework of Professional Practice. One of the primary responsibilities of the Steering Committee was to provide advice and guidance, and to identify practitioners and supervisors who could contribute to the focus groups that were carried out in February and April of 1998. At the final meeting in May 1998, the Steering Committee made the following recommendations to the renamed Ministry of Advanced Education, Training and Technology (MAETT) (was MEST).[44]

1. To distribute province-wide the ID/SCC Consultants' Framework of Professional Practice.
2. To collect feedback on the Framework by February 1 1999.
3. To develop a framework for a professionally recognized credentialed program in ID and SCC Consultant training with input of a provincial committee.
4. To work in partnership with the MCF in establishing support for pre and in service training for Consultants through their employers.

There has been ongoing follow-up to the recommendations of the Steering Committee for the Occupational Competencies of SCC/ID Consultants. From the fall of 1998, until the spring of 1999, the following work was undertaken:

- Distribution of 200 copies of the ID/SCC Consultants Framework of Professional Practice.
- Compilation and collation of the feedback sheets for the Framework by January 31 1999, for evaluation purposes.
- Organization of an advisory committee to assist in the review of existing courses and the development of potential new courses in consultative practice, based on the ID/SCC Consultants' Framework of Professional Practice.

Currently, an advisory committee is making recommendations on work already in progress. The committee includes members from ID/SCC Consultant programs, the Early Childhood Educators of BC, the University of Victoria and the University of British Columbia, the college sector, the specialized child care administrators' sector, the MCF and the MAETT. The final report will contain an inventory of existing Early Intervention courses available for SCC consultants in

British Columbia and will examine the current availability of certification programs.

The analysis of the report is based on a search of formal educational opportunities in post-secondary institutions in BC. The report examines course offerings in light of the competencies outlined in the Framework of Professional Practice and suggests that the competencies would need further specification. The report distinguishes core competencies from generic competencies.

Core competencies are those specialized competencies which distinguish the areas of practice from other human service educational areas, whereas generic competencies may be shared across disciplines and practice areas without sacrificing quality and integrity of training.[45]

Preliminary recommendations in the report include:[46]

- Development of a credentialing body to establish and maintain professional standards in the field.
- Modification of existing relevant courses.
- Development of 3rd and 4th year level courses towards a credentialing program.

This report will be completed in April 1999.

In December 1998, additional Framework feedback sheets were sent to all known SCC (50) and ID (51) consultant programs as a reminder of the January 31 1999 return deadline. Of the 105 feedback sheets, 46 were returned (43.8% return rate in total) from 21 SCC programs (42% of SCC programs), twenty ID programs (39.2% of ID programs), two consultants working as both types of consultants, one CCRR, and two college instructors in Early Childhood Care and Education.

Based on the responses,[47] it was identified that the primary role and benefit of the ID and SCC Consultant Framework of Professional Practice is in the area of evaluation, whether used as a program evaluation tool or as a self-evaluation tool. It defines and clarifies practice for the consultants and for community partners.

Concerns about the Framework focused on the appropriateness of ID and SCC consultants utilizing the same Framework for work that is different in terms of the age range of children that they serve, and the capacities in which they serve clients. Training was noted as a key interest of the consultants, if they are to meet the functions outlined in the Framework. As well, respondents identified that provincial guidelines are essential considering the evolution of SCC, especially with the influx of SCC consultants since the start of the transition to SCC in April 1995.

4.8 Develop a Support Guide and Other Materials

4.8.1 Support Guide

Ministry policy stated (1996), that children must have one or more disabilities to be eligible for the SNDCP.[48] The Support Guide[49] was intended to replace the eligibility criteria. Rather than replacing the eligibility criteria, the Support Guide is now intended to help determine support needs for a child in a child care setting, through a collaborative process with the parent, child care provider and SCC consultant. The completed Support Guide requests funding for supports from the MCF. A child would need to be deemed eligible for services provided by the MCF in order to undergo the Support Guide process, prior to determining support needs.

In the summer of 1995, a preliminary draft of the Support Guide was created by a Committee made up of five SCC consultants. The initial draft was distributed in November 1995, to 60 readers including SCC and Infant Development consultants, Licensing Officers, CCRR staff, specialized child care setting staff (Child Development Centres), college instructors in Early Childhood Care and Education, and parents with children requiring extra support. Feedback was returned by the end of December. Half of the recipients returned the draft with comments. Changes were made on the basis of this feedback and a revised draft was distributed in February 1996, to the following groups:

- child care providers,
- parents,
- Infant Development consultants,
- Child Development Centres,

- SCC Steering Committees,
- college instructors,
- Licensing Officers,
- then Child Care Support Program staff,
- therapists,
- school district personnel,
- then Ministry of Social Services staff,
- 60 individuals at an Early Childhood Educators of BC conference workshop,
- all SCC consultants,
- and other interested individuals.

The draft was accompanied with an evaluation form. Thirty-one evaluation forms were returned by May 1996. Four main issues and four recommendations came out of the evaluation and were raised consistently in the use of the Support Guide.[50]

1. The process for filling out the Support Guide is time-consuming.
2. The sheets are not clear and do not have enough space on them.
3. It is not clear if support needs can be determined and reviewed consistently.
4. The Support Guide works best for children in the 3 to 5 age range.

The four main recommendations included:

1. The first draft of the Support Guide should not be rewritten at this time as the feedback was from a very small sample.
2. The draft should be piloted and tested over a period of a year.
3. Training should be provided in the use of the Support Guide.
4. The use of the Support Guide should be linked to the development of guidelines of practice for SCC consultants.

In March 1998, MCF decided to conduct an evaluation of the Support Guide. A contractor was hired. KAPH Associates were contracted to evaluate the Support Guide for the MCF. The study consisted of two components: a survey of child care consultants and a series of interviews of SCC consultants, child care providers, and parents. Nine communities were surveyed over a five month period, from November 1997 to March 1998. A total of forty participants were interviewed, including child care providers, parents, and SCC consultants. The findings generated by the feedback in 1996 were echoed in this evaluation, with additional conclusions and recommendations as follows.[51]

- The Support Guide remains a "work in progress" and with modifications and improvements, can play a useful part in the transition to SCC.
- The Support Guide reflects and can help realize the five principles of SCC.
- Some form of training is necessary to enhance the usefulness of the Support Guide.
- With modifications, the Support Guide could more clearly provide for follow-up meetings and reporting.
- In order to facilitate the use or "buy in" of the Support Guide, the results of this evaluation should be shared with the field, particularly with those who so thoughtfully participated in the evaluation of the Support Guide.
- Realistic resources must be provided if the Ministry is to ensure "buy in" and participation by all parties.
- In modifying the Support Guide, regional and individual variations should be recognized.
- The Support Guide appears effective when approached and operationalized as a team-based, consultative tool.

Based on the issues and recommendations of the two evaluations, the Support Guide underwent some revisions. The original committee was reinstated to make suggestions based on a summary of the findings and their own experience working with the Support Guide over a two year period. The final revisions were recommended by the committee. As a

result it was determined that:

- The Support Guide remains the same length, but the necessity to fill out all the forms is optional and dependent on the needs of the regional MCF staff to respond to the request for support.
- What is key to filling in the Support Guide, is the process engaged in by the consultant with the family and provider. How it is documented is not as important as the collaborative relationship formed in accessing that information.
- Training in the collaborative process is the most important aspect if effective completion of the Support Guide is to occur. Training would be enhanced by developing a Handbook outlining the process to completing the Support Guide with a family and child care provider.
- The language of the Support Guide and the language of the eligibility criteria, within the MCF policy for SCC, should be the same. Use of consistent language would make it simpler for the MCF social worker to respond to a request for support based on the use of the Support Guide.

The responses of the 1998 survey participants reflects differences in approaches to the consultative process. Those consultants that had knowledge and skills and believed in and practiced the consultative process, had a more favourable response to the stages that the Support Guide took people through. Those providers and families that were involved in the completion of the Support Guide based on a collaborative approach saw far greater benefits to the use of the Guide.

In 1999, the Support Guide Handbook was developed and distributed to all SCC consultants, SCC Contacts, and relevant MCF social workers involved in SCC. The Support Guide Handbook explains the Support Guide in more detail and presents optional approaches to the use of the forms, while stressing the process required to obtain the required information to determine support needs. Brochures were also developed to outline the process of using the Support Guide to request support from the MCF. One was developed for families, and one for child care providers. In addition, there was an emphasis on streamlining the language of the Support Guide with the language of the eligibility criteria of the MCF, further supporting the collaborative process required in meeting the needs of children, families, and providers through SCC.

In February and March of 1999, all SCC consultants and MCF social worker staff involved with SCC, received training in the use of the Support Guide. The Support Guide Handbook was mailed in advance of the training, for consultants and social workers to preview and become familiar with the revisions and the process that would be stressed throughout the training. There were six-two hour training sessions delivered via video conferencing to all regions of the province. There were six to twenty-five people at each site for each delivery, with anywhere from four to six sites on line at any one time. A total of 151 SCC consultants and MCF social worker staff participated in the video conference training. Participants were walked through the Support Guide Handbook which emphasizes the collaborative process between the consultant, parents and child care providers, as they define the request for support for a child requiring extra support.

Discussion during the training sessions focused on:

- differences in service delivery models (more consultative services versus more hands-on support to the child care field);
- issues of caseloads and time to complete the Support Guide via the process described in the Handbook;
- questions regarding whether the entire Support Guide needs to be completed or if a social worker could just request the last summary page of the Support Guide and the effectiveness of receiving only that page.

Responses to the training were collected through a faxed feedback sheet. The return rate on the feedback sheets was poor, with a total of 20 out of a potential 151, being returned. Most responses were positive. Frustration was expressed with the sound and image delays of the technology, while at the same time recognizing the costliness of conducting the training in person. Things that people liked about the training included:

- discussion with MCF social workers;
- that it was close to home;
- hearing how other regions were delivering SCC;
- the Handbook was easy to follow;
- receiving the Handbook in advance of the video-conference;

- that flexibility is still the key to making it all work;
- feeling connected and included;
- knowledge and preparation of the facilitators;
- opportunities for questions and comments.

Suggestions for improving the training included:

- preference for in-person training;
- practice filling out the forms;
- need for follow-up in the fall;
- more time for group discussions;
- improved technology;
- more in service training events like those for ID programs;
- would like to see video taped role playing of the process;
- attendance of more MCF staff.

Training to use the Support Guide was also provided at a CCRR symposium in February 1999 to 49 participants. This symposium offered participants an opportunity to hear the outcomes of the CCSI projects over the past four years. Sixteen participants rated the Support Guide presentation. Four felt it was fair, eight felt it was good, and four felt it was excellent. Comments included:

- great to have a manual that is clear and user friendly;
- well presented;
- very useful changes to the guide.

4.8.2 Enhancing Accessibility Resource Manual

The Enhancing Accessibility Resource Manual was developed to assist community Steering Committees and the child care sector in making informed decisions about changes that may be needed in child care settings in order to make them accessible for children requiring extra support. Due to the limited funding provided to make child care settings physically accessible, it was suggested that a manual be developed to educate the child care field in inclusive programming, practices and environments to ensure a wise use of the available funds. The Enhancing Accessibility Resource Manual was written in the fall of 1996 and distributed in the spring of 1997.

The primary audiences for the manual were SCC consultants and Steering Committees, Child Care Resource and Referral staff, college instructors in Early Childhood Care and Education, Infant Development Program consultants, Licensing Officers, and the Westcoast Child Care Resource Centre. It was felt that this group would share the information in the resource manual, as the need arose, with individual child care providers. In the summer of 1998, a survey was distributed to evaluate the level of use and the utility of the manual.

There were 5,085 surveys distributed to the previously mentioned group, as well as all licensed child care facilities in the province. However, not all licensed child care facilities had received the manual. As a result, 365 surveys were returned with 81 indicating that they had never received the manual. Two hundred and eighty-four surveys were returned and used in the analysis of the manual.

Results of the user survey indicated that:[52]

- Eighty per cent found the manual to be helpful or somewhat helpful.
- SCC consultants found the manual to be most helpful and licensed family child care providers found the manual to be least helpful.
- Ways in which the manual was reported to be helpful were as a personal resource, as information to be shared, as an aid in designing or adapting facilities, in providing checklists and rating scales, and in making policies and procedures related to inclusion.

Seventy-eight responded to the item on meeting information needs. Fifty per cent felt they did not need the information it contained; 13% felt the information was complete; 6% would have liked more information on accessing funding; 4% reported the information was outdated in places. Forty-one per cent shared the manual or made others aware of it. The rest had not seen a need to do so (93 % of SCC consultants had done so). Seventy-nine per cent stated they would recommend the manual to others. A revision of the Enhancing Accessibility Resource Manual, based on reader feedback, will be completed in the spring of 1999.

4.8.3 SCC Consultant Resource Package

A newly formed SCC program in Vancouver stimulated the concept of a provincial resource manual for SCC consultants. Work on the manual began in January 1999. A review of current provincial manuals (eg. Infant Development manual) altered the original vision of a policy and procedures manual to a compilation of interrelated materials in the form of a Resource Package with relevance for SCC consultants. Resources in the SCC Consultant Resource Package would include:

- Framework of Professional Practice
- Support Guide Handbook and related pamphlets
- annotated bibliography of books, articles and videotapes
- Victoria Steering Committee SCC video - Part of Our Lives (developed with Access Initiative funds)
- Transition into the School System Handbook (developed by a Victoria-based SCC consultant)
- an updated mailing list of all SCC consultants in the province
- listing of provincial resources: associations, organizations and societies related to the areas of inclusion, therapy services and family support organizations
- informative pamphlets
- journal list

The SCC Consultant Resource Package is a collection of practice-oriented resources for consultants that relate to the Infant Development and SCC Consultant Framework of Professional Practice. The intention is to provide new consultants with an orientation package. For the experienced consultant who has been in the field for a number of years, it provides a reaffirmation of their practice. The package will assist in orientation of new staff, explain the consultant position to partners in the community, and support ongoing goal-setting for professional development opportunities and practice reviews. Though the SCC Consultant Resource Package is not what was originally requested, it brings together a number of separate pieces for consultants, in an attempt to provide consistency of practice in the province.

4.9 Summary

This section addressed the extent to which a service delivery framework was developed to meet the needs of children requiring extra support. The ministerial collaboration emphasized within the original SCC Report (1993) was the foundation to the transition period from April 1995 to March 1999. Each ministry had specific activities and initiatives to undertake in support of creating a new service delivery model.

A SCC transition coordinator was hired by the MCC in April 1995 and remained on contract until September 1997. During that period a SCC Transition Handbook was developed and distributed, three newsletters were developed and information on SCC was shared throughout the province.

Local transition planning processes were facilitated by the organization of 49 regional SCC Steering Committees. Conference calls provided needed information on SCC to the regions. SCC Contact positions were created within MCF offices in order to assist in the information sharing process around SCC on a regional basis. In response to challenges with the implementation of SCC, a SCC Resource Team was created to provide support around service delivery restructuring. In addition, Access Initiatives provided $1.771 million to address identified needs in the area of attitude, skills, and knowledge. A final report on the Access Initiative provided an extensive inventory of projects developed over the course of the transition.

Training was addressed through professional development opportunities for SCC consultants and ministry staff. Child care providers were provided with enriched professional development opportunities at yearly professional association conferences for three years. The Ministry of Advanced Education, Training and Technology dispersed funds to 18

post-secondary institutions over the four years to provide augmented training opportunities in the area of inclusion for child care providers and parents. In some instances, new courses were developed and in others, extended training in the principles of SCC were piggy-backed onto existing courses in early childhood care and education. New Partnerships Training packages were developed to provide training which would enhance partnerships to assist in the development of a more inclusive system of care for children requiring extra support. Evaluations were completed in all areas of training which reported positive results.

Opportunities to share information and network (eg. with parents, child care providers and MCF staff) were organized on two separate occasions via symposiums on SCC issues. Also the SCC newsletter was revised to have a more community-driven approach. A multiple-language poster on SCC was created and distributed, in addition to brochures describing SCC for parents and child care providers.

To facilitate transition practices and standards for SCC, a new SCC policy was developed within the broader scope of MCF. In addition, competencies for SCC consultants in partnership with other early interventionists (i.e. Infant Development consultants) were developed. the SCC and Infant Development consultants provided feedback to the competencies a year after their release, confirming their usefulness as a program and self-evaluation tool. In the last year of the transition, an analysis of formal educational opportunities in post-secondary institutions in BC occurred. It indicated the need for more course development to prepare consultants for SCC practice.

Throughout the transition period, materials were developed to assist with practice in a new service delivery framework. After two initial drafts and evaluations, the Support Guide was completed. This tool was developed to determine the support needs of a child in a child care setting in the form of a request to the MCF. The Support Guide tool was accompanied by a Support Guide Handbook outlining the consultative practice required to determine support needs, as well as brochures describing the Support Guide for parents and child care providers. The Enhancing Accessibility Resource Manual was developed to assist the child care sector in making informed decisions about the changes that may be needed in child care settings in order to make them accessible for children requiring extra support. This manual underwent a final revision based on practitioner feedback. As well, SCC consultants received a compilation of interrelated materials pertinent to the practice of SCC in the form of a Resource Package. This package contained the SCC competencies, the Support Guide Handbook and the Support Guide on disk, a SCC video produced by a community using their Access Initiative funds, and other program specific materials.

As outlined in this summary, the development of the new service delivery framework for SCC was extensive and required the involvement and partnership of many ministries within the provincial government and with community members. The development of this framework incorporated a range of levels of practice, orientation, and interests of individuals involved in child care. Overall, it addressed the needs of children requiring extra support and the needs of their families.

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Section 5 - Outcome: To Create a More Inclusive Child Care System

5.1 Overview

This section of the report addresses the extent to which SCC achieved its expected outcome to create a more inclusive child care system in BC where every parent has the same choices and every child belongs.

5.2 Inclusive Child Care System

When the transition to SCC began in April 1995, there were over 3,000 children who required extra support receiving some level of support from the provincial government.[53] At that time there were approximately 250 contracts and 900 authorizations between the provincial government and child care settings to provide some level of care to children requiring extra support in child care. One third of those children were in segregated groupings or specialized settings that were not considered inclusive.[54]

Through the planning process over the four year transition, the reduction of specialized settings has become part of the SCC Implementation Plans for many communities. For example, in the Vancouver Implementation Plan, years two and three (1998/99) continued to reduce contracts until the final year when there would no longer be any specialized settings, other than those agreed upon within the Vancouver Implementation Plan.[55] The "block" funding formula of the SNDCP (guaranteed funding for annual additional staffing, regardless of the complexity of needs of the identified children requiring support) would be replaced by Inclusion Contracts. These would be instituted for the majority of child care settings. An "Inclusion Contract" would guarantee consultant support through the SCC program and possible extra staffing if required, depending on the individual needs of the children identified requiring extra support.

The Implementation of SCC in Burns Lake, Bulkley Valley, and the Hazeltons recommended that a reduced existing contract remain with the Child Development Centre in that area (a specialized setting) only until June 1998, at which time the money would go to the new SCC program budget.[56]

At the completion of the four year transition period, the majority of regions within the province had developed SCC Implementation Plans that reflected the reduction in specialized contracts. Those regions that continued to struggle with the shift in funding and delivery of services were provided assistance by the SCC PRT. They were provided with a financial assessment of the financial implications and guidelines for implementing the five principles of SCC into an effective transition plan.

As stated earlier, one of the fundamental principles of SCC is inclusion.[57] Ministry staff have universally endorsed the principles of SCC.[58] Implementation Plans echoed the principles through the recommendation that more funds go to inclusive community-based child care settings, rather than the specialized settings. It is apparent that not all communities have met this recommendation. The SCC PRT noted in July 1998, that those communities having the most difficulty making the transition are those that were fearful that the funding formula reflects inadequate money for specialized services and stability otherwise seen as a back door way of closing centres without explicitly saying so.[59] For example, in Prince George, the Steering Committee feels that the Child Development Centre (the specialized setting in that community) should remain an option for parents.[60]

It is apparent, that some communities did not fully comprehend that the transition period was not intended to provide them with the opportunity to decide if they would make the change from the SNDCP model to SCC. "The goal of the transition period was to give communities the opportunity to produce locally responsive and effective plans for the implementation of SCC."[61] Those plans were to be based on the principles of SCC which includes the principle of inclusion.

One indicator that more communities have implemented SCC is the increased numbers of SCC programs and consultants in the province. At the start of the transition in 1995, there were 26 SCC programs and 50 SCC consultants. As of March 1999, there were 55 SCC programs and 146 SCC consultants. This increase indicates that there has been an increase of 112% in programs and a 192% per cent increase in the number of SCC consultants. This implies that there are less children in specialized settings and more in community-based child care settings, with child care providers receiving the support of SCC consultants.

The *Final Report: Experiences and Satisfaction with SCC in Four B.C. Communities* (Focus Consultants, 1999)[62] presents the results of surveys in four communities. Three sets of respondents were surveyed, including parents of children requiring extra support, child care providers and allied professionals (therapists, public health professionals, social workers and school personnel). The surveys were designed to assess:

- the accessibility, quality and inclusiveness of child care options for parents of children who require additional support in child care settings;
- the satisfaction of parents with the number and quality of SCC options available to them; and
- the level of satisfaction of child care providers and allied professionals with the quality of SCC services they are able to provide.

Two-thirds of the parents surveyed felt they had some or a lot of choice in selecting a service. One-third felt they had hardly any choice at all. On most measures parents rated the support they received in accessing child care highly.[63] Responses varied by community. Some of the communities had well-established SCC programs while others had just begun implementation.

5.3 Summary

This section addressed the extent to which SCC achieved its expected outcome to create a more inclusive child care system in BC where every parent has the same choices and every child belongs. At the start of the transition in April, 1995, there were over 3,000 children who required extra support receiving some level of support from the provincial government. One third of those children were in segregated groupings or specialized settings that were not considered inclusive. Through the planning process over the four year transition period, the reduction of the specialized settings became part of the SCC Implementation Plans for many of the communities. Some communities continue to struggle with making the transition. A SCC PRT is assisting them in this process. One indicator that more communities have implemented SCC is increases in the number of SCC programs and consultants in the province. This implies that there are less children in specialized settings and more in community-based child care settings, as there are more community supports offered.

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Section 6 - Outcome: Participation in Inclusive Settings and Quality of Service

6.1 Overview

This section of the report addresses the following two questions: Under SCC are there more children participating in inclusive settings? How well are those children being served?

The question of numbers of children is answered through statistical documentation. The issue of quality of service is ascertained on the basis of survey data.

6.2 More Children Participating

In 1993, over 3,000 children who required extra support while in child care were receiving funds through the SNDCP of the MSS.[64] In July 1998, there were 5,600 children receiving support in child care settings.[65] More children with support needs are receiving services in child care (an increase of 87%) as a result of SCC.

6.3 Quality of Service

One measure of improved quality of service is the increased number of SCC consultants and SCC programs. Through their assistance, child care providers are developing specific child care plans. The MCF contracted with a consultant[66] to assess the experiences and satisfaction with SCC in four communities through surveys of three sets of respondents: parents of children requiring extra support, child care providers, and allied professionals (including SCC consultants). The surveys were conducted from mid-November 1998, to early February 1999. The four communities selected for the study varied in size and in the number of families served through the SCC Program (32 families in Langley and 127 families in Campbell River). One community had been providing a SCC service delivery model since 1989 (Campbell River), six years prior to the start of the transition to SCC. Another community (Smithers/Hazelton) had just begun delivering SCC in the fall of 1998.

The surveys rated services on a five point scale (1 = very dissatisfied; 5 = very satisfied) provided in the following areas:

- accessing and selecting services;
- quality of service;
- responsiveness towards the needs of the children and families;
- inclusiveness of the service delivery model.

In the *Final Report: Experiences and Satisfaction with SCC in Four BC Communities* (Focus Consultants, March 1999) 80% of all respondents stated that a specific child care plan had been developed with the child care provider, to meet the

child's needs for extra support.[67] Ninety-six per cent of parents felt the plan suited some or all of the child's extra support needs. In addition, 93% of parents felt that the child care provider usually provided activities and experiences appropriate to their child's age and level of development. These findings indicate that parents are satisfied with the services and supports their children are receiving within a SCC service delivery model.

Overall, the mean satisfaction rating by child care providers with the information and materials provided to them about the implementation of SCC was 3.8. They rated the support available to help them overall was good. The mean rating of satisfaction by parents, with how their child's needs were being met in the child care setting was very high. The satisfaction with the delivery of SCC by child care providers, in terms of its impacts on children requiring extra support was fairly high.

Opportunities for post-secondary training were dramatically increased and subsidized over the four year transition, as noted in the Section 4.5 of this report. Community partners, such as CCRR program staff received additional training in SCC principles and practices to enhance their knowledge and consultant skills to the child care sector. Workshops were offered over three years in ID/SCC/Early Intervention at the ECEBC annual provincial conferences, reaching a greater audience of practitioners in the child care field. Communities provided workshops, often at a reduced rate or no cost to participants, in the area of inclusive practice. Partnerships Training packages reached every region of the province since 1995. Facilitators were trained so that Partnerships Training will continue past the transition phase and become an integral part of supporting and enhancing skills of child care providers. This indicates a potential increase in skill level for practitioners which supports improved quality of service for children requiring extra support.

6.4 Summary

Over the four year transition period to SCC there was an increase of 87% in children requiring extra support receiving services within the MCF. Based on increased numbers of SCC consultants and programs in the province, as well as access to training opportunities for the child care sector, an improvement in quality of services provided to children and families can be expected. A report by Focus Consultants found that 80% of all respondents stated that a specific child care plan had been developed with the child care provider, to meet the child's needs for extra support. In addition, 96% of parents felt the plan suited some or all of the child's extra support needs. This indicates satisfaction with the quality of service provided for children requiring extra support by their parents.

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Section 7 - Outcome: Capacity and Accessibility

7.1 Overview

This section of the report addresses the following two questions: What is the capacity to provide inclusive child care through SCC? How has accessibility to inclusive child care been impacted?

This section addresses the question regarding capacity by looking at the increased skills, attitudes and knowledge of the child care providers and how this impacts their ability to provide inclusive child care. Accessibility is addressed through the satisfaction of parents with the ability of child care settings to meet the physical needs of children requiring extra support. As well, the materials produced to address the area of accessibility are described.

7.2 Capacity

The *Final Report: Experiences and Satisfaction with SCC in Four BC Communities* (Focus Consultants, March 1999) identified that 92% of parents and 83% of allied professionals rated the attitude of child care providers towards inclusion of children requiring extra support positively.[68] The data from the report supports this increased capacity to provide inclusive child care.[69] It shows that the mean rating of parents regarding the attitude of child care providers toward the inclusion of children who require extra support was 4.6 on a 5 point scale (1 = very negative; 5 = very positive). Child care providers, when asked about their confidence about being able to include children requiring extra support, had a mean

rating of 4.3 on a 5 point scale.

As well, there has been movement in the definition of, and support for the SCC consultant position, that has evolved over the past four years. Through the definition of functions, activities, and performance indicators in the Infant Development/SCC Consultants Framework of Professional Practice a picture emerges of how the child care sector and families can be supported.[70] The *Final Report: Experiences and Satisfaction with SCC in Four BC Communities* (Focus Consultants, March 1999) stated that across the four communities surveyed, there was consensus by the three sets of respondents, that child care plans were being well developed and that the plans were meeting some or all of their child's needs.[71] This level of support to the child care provider facilitates positive attitudes towards inclusion, as well as a means to provide inclusive child care. As well, through increased training opportunities in SCC, child care providers have accessed the necessary skills to provide inclusive child care.

7.3 Accessibility

In terms of how accessibility to inclusive child care has been impacted, the *Final Report: Experiences and Satisfaction with SCC in Four BC Communities* (Focus Consultants, March 1999) addressed the issues of the suitability of activities and the safety of environments for children requiring extra support. Ninety-three percent of parents felt that the types of activities provided in the child care setting were suited to their child's age and level of development.[72] Over 80% of families stated they did not have problems ensuring a safe environment for their children requiring extra support in child care settings.[73]

The Enhancing Accessibility Resource Manual was developed to assist community Steering Committees and the child care sector in making informed decisions about changes that may be needed in child care settings in order to make them accessible for children requiring extra support. Eighty per cent found the manual to be helpful or somewhat helpful.

The Access Initiative allocated funds to each SCC Steering Committee. This was to be used to develop a community access plan and to address identified needs in the area of attitudes, skills and knowledge.[74] Once committees had assessed people (focusing on attitudes, skills and knowledge), programming and physical needs for their community-based settings, then they could develop a Community Access Plan. Priorization sheets were then categorized into "no cost", "low cost", "moderate cost" and "high cost" solutions. The following are some of the ideas and projects generated through these funds that have an impact on accessibility:

- production of TV ads for inclusive child care
- workshop offerings on inclusive child care practices
- provision of interest-free loans for the purchase of equipment and materials for structural renovations
- purchase of a portable wheelchair ramp
- installation of handrails in bathrooms
- development of support groups, brochures and service directory to inform and empower families
- development and distribution of kits explaining how to make low/no cost changes to child care environments
- building change tables and other adapted furniture required by some child care settings

7.4 Summary

The capacity to provide inclusive child care through SCC has been facilitated through increased training opportunities for child care providers. Also, additional support into the child care settings, such as SCC consultants, assists child care providers to provide an inclusive child care environment. These opportunities have impacted on the attitudes, skills, and knowledge of child care providers and their capacity to provide inclusive child care. This has increased the accessibility to inclusive child care which is evident through the parents' satisfaction with the activities planned for their children. In addition, parents feel that the child care settings are a safe environment for their children requiring extra support. Materials such as the Enhancing Accessibility Resource Manual have provided valuable information on making child care settings more accessible. The Access Initiative generated ideas and products directly related to accessibility in child care.

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Section 8 - Outcome: Impact of the Resources Developed

8.1 Overview

This section of the report discusses the impact of the resources developed/devoted to supporting inclusive child care under SCC. The main provincial resources noted in this report are the Enhancing Accessibility Resource Manual, the Support Guide and the companion Support Guide Handbook, as well as the SCC Consultant Resource Package.

8.2 Enhancing Accessibility Resource Manual

The Enhancing Accessibility Resource Manual addressed accessibility and inclusion issues from the perspective of the people involved in inclusive child care; from the perspective of programming concerns of inclusive child care; and from the perspective of enhancing the place or environment of inclusive child care settings.[75] Practical ideas were provided that addressed attitudes, skills, and knowledge, as well as easily implemented strategies for child care providers to use in adapting their child care environment and programs. Eighty per cent found the manual to be helpful or somewhat helpful. Though there was a limited response rate to the user survey of the Enhancing Accessibility Resource Manual, 79% of the respondents said that they would recommend the manual to someone else.

8.3 Support Guide

The March 1998, evaluation of the first draft of the Support Guide, praised its impact on the collaborative nature of determining support needs.

One parent is quoted as saying about the Support Guide:[76]

- It gives me an idea of where he's at - to actually sit down and think of it - you know, when you've got other children at home and you might not even notice things, what he does, what he doesn't do, but this makes you look at it and watch what he does.

A child care provider describes the Support Guide process:[77]

- So it really helped in terms of pieces being put together and that as this child came in he had those supports behind him. I had the support in terms of getting some professional advice in terms of what I could expect. So it was great. The family came in and they had some information and some choices made and we sort of met and checked it out.

A SCC consultant reflects on the use of the Support Guide:[78]

- The Guide was there but it was a process that we are already in so I'm not sure if I would refer to it except to back us up to make sure that we're on the right track...it's so much a part of our work, it's what you do. I guess a way of bridging other parties into it as a tool for discussion...it isn't ever the tool that determines one way or the other, it doesn't ever change things, it just supports the decisions that are made.

MCF SCC Contacts made suggestions about the Support Guide that imply:[79]

- (In practice, many offices are moving to this approach, by using the Support Guide plus other tools to arrive at an assessment of the need for supports as part of the eligibility process.)

As the revised Support Guide is new and as yet untested in the full implementation of SCC it is difficult to state emphatically what the impacts will be. The responses of the 1998 survey participants reflects differences in approaches to the consultative process. Those consultants that had knowledge and skills and believed in and practiced the consultative process, had a more favourable response to the stages that the Support Guide took people through. Those providers and families that were involved in the completion of the Support Guide based on a collaborative approach saw far greater benefits to the use of the Guide.

The response to the Support Guide Handbook has been positive. In the feedback on the training offered, the use of the Support Guide in February and March 1999, participants commented on the Handbook and the Support Guide as well. Their comments included:

- great to have a manual that is user friendly and clear
- Handbook is easy to follow
- Support Guide is well laid out samples in the Handbook are very useful

8.4 SCC Consultant Resource Package

The SCC Consultant Resource Package was distributed to consultants at the end of March 1999. Evaluation of the impact of the Resource Packages are not available at this time.

8.5 Summary

This section reported on the impact of the resources developed to support inclusive child care under SCC. The main provincial resources noted are the Enhancing Accessibility Resource Manual, the Support Guide and the companion Support Guide Handbook. Both the Manual and the Handbook (and Support Guide) have received positive feedback for their usefulness in the area of including children requiring extra support. The SCC Consultant Resource Package was not evaluated by the release of this report.

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Section 9 - Outcome: Cost-Effectiveness

9.1 Overview

This section addresses the following two questions: Is the SCC model a cost-effective way of achieving the expected outcome? Are there more cost-effective methods of achieving the same outcomes?

This area of SCC has not been evaluated through the transition period. Much of what is presented in this section is still in the process of being finalized and determined. As implementation plans are completed and SCC programs are fully realized there will be an ability to respond more definitely to these questions.

9.2 Cost-effectiveness of SCC

As with many of the questions being posed, it is difficult to respond before full implementation of SCC is achieved. It was the ministry's intention to use the SNDCP budget to fund SCC. The *Case Study in Four Communities* concluded that:

- In reality, SCC is a very different type of service framework from SNDC, and may require different funding allocations to serve children and families adequately. In addition, using the same budget levels means any funding disparities between regions will be carried over to the SCC program.[80]

The original report on SCC stressed that parents who's children require additional support should enter the child care system in the same way as any parent. That is, they should pay the direct costs of the child care space. The ministry would pay for the extra supports required by the child and setting in order for that child to be included in the child care setting. This was a dramatic departure from the original policy under the SNDCP where, in most situations the ministry paid for 100% of the costs of the child care space and the additional supports required for the child to attend the child care setting. Under the SNDCP, one third of the children requiring extra support in the province attended specialized child care settings. The government contracted directly with the specialized centres to provide service.

The *Government Response* proposed a non income-tested (Special Needs Subsidy of $107 per month to offset the cost of the child care setting fees. That is, the family would pay the child care setting fee, but if their child was deemed eligible for

the SCC program then they could receive the $107 payment. In some instances the $107 would cover the total child care fee (for some part time programs). If a child was attending a full day program then the $107 could be applied to the full cost of the child care fees and reduce what the family would be expected to pay. In such a situation, if the family required additional financial support and if they met the income text requirement, they could apply to the regular child care subsidy program for a portion of the balance of the fees. The ministry would continue to pay for the extra supports required by the child and setting in order for that child to be included in the child care setting.

It is still not apparent if parents would perhaps opt not to access child care services knowing they would be required to pay a portion of the child care costs. The implementation of the $107 payment varies from region to region and is not fully implemented in all regions. Social workers that are administering the $107 subsidy report:

- that a substantial number of the families applying for the $107 are new clients, i.e. they did not previously contact the Ministry for services for their child with special needs. The direct cost of the subsidy is, therefore, likely higher than originally projected.[81]

This increase in requests may be due to the increase in children receiving services (as noted previously 3,000 children in 1995 and 5,600 in 1998). Parents now pay either full or partial child care costs which previously were paid in full by the provincial government. What is important to keep in mind is that those increased number of children are receiving services within the same budget that existed in 1995.

9.3 More Cost-effective Methods

Other models outside of BC were never considered throughout the transition. When the initial *SCC Report* (1993) was written, other models outside of British Columbia that were similar to the philosophical intent of SCC were reviewed, as well as current SCC consultant programs within the province that had already emerged and addressed individual community needs. These existing programs reflected the principle-driven approach of SCC. During the transition, the *Case Study of Four Communities* studied the transition that those communities went through but not their models of service delivery. There are no comparisons of models available, nor has there been a cost-comparison done.

9.4 Summary

In this section the cost-effectiveness of SCC is considered. The issues of funding and subsidy are still to be finalized and will not be fully evaluated until full implementation of SCC is achieved. Based on the number of children served, it would appear that SCC is a more cost-effective way of providing service because 80% more children are accessing services under the same budget that was in place at the beginning of the transition. As the transition to SCC began there were no other proven models in place to compare with SCC. As a result, the province of BC is not aware of more cost-effective methods of achieving the same outcomes. The full implementation of SCC is not yet realized.

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Section 10 - Discussion

10.1 Overview

This section outlines the main themes addressed in this report in assessing the expected outcomes of the SCC component of the CCSI. the ultimate objective of SCC was to create a more inclusive child care system in British Columbia where every parent has the same choices and every child belongs.

10.2 Discussion

This report provided a summary of events over the four year transition to SCC framed within responses to questions developed jointly by the Federal and Provincial Governments' Strategic Initiative Joint Evaluation Working Group.

In December 1994, the Government of British Columbia endorsed a new way to include children requiring some level of

support in child care settings. The new direction required a shift in policies and practices from the previous SNDCP to a new SCC, community-based family support program. Rather than piloting the new service delivery framework, the Government of British Columbia chose to make the program shift over a four year period (1995-1999). The transition to SCC was made possible through the four-year Canada/British Columbia CCSI.

Inclusion in the broader child care system would be achieved, in part, through increasing the supports necessary for the provision of safe and healthy environments for children who require extra support. In reviewing the documentation of SCC over the past four years, the SCC transition accomplished the following within the implementation timeframe:

- Support for inter-ministerial activities continued throughout the duration of the transition;
- A provincial transition coordinator facilitated provincial transition planning and supported regionally-based transition planning through networks of support and information sharing;
- Models of well-supported inclusive child care systems were developed in most parts of the province;
- Training opportunities were created for Ministry staff, child care providers, and parents;
- Standards and practices have been or are continuing to be developed for SCC;
- A Support Guide was created as well as other materials such as the Enhancing Accessibility Resource Manual to assist child care providers and families in making decisions to best meet the needs of children requiring extra support;

A service delivery framework was developed to meet the needs of children requiring extra support through inter-ministerial activities. The transition to SCC was philosophically-driven by a set of principles reported on in the SCC Report (1993). During the development of the original SCC Report through the SNDC Reference Committee, five ministries (Ministry of Social Services, Ministry of Women's Equality, Ministry of Education, Ministry of Health, Ministry of Advanced Education, Training, and Technology) had representation on the committee and made recommendations for action through their ministries to support the move to SCC. The five ministries continued to be integral to the transition to SCC. Their participation in the transition process was to ensure action would be taken on the various recommendations. Each ministry had specific activities and initiatives to undertake in an effort to develop a new service delivery model.

A SCC transition coordinator was contracted by the MSS from April 1995 to September 1997 to head the transition project. During that period a SCC Transition Handbook was developed and distributed, three newsletters were created and information was distributed on SCC throughout the province. The creation of the provincial transition coordinator position was described as a highlight of the SCC Transition Project and a wonderful support.[82] The provincial transition coordinator acted as a liaison between the provincial government and communities, gathering feedback from the regions and relaying it back to the provincial government (MSS).

Local transition planning processes were facilitated by the organization of 49 regional SCC Steering Committees. Conference calls provided needed information on SCC to the regions. SCC Contact positions were created within MCF offices in order to assist in the information sharing process around SCC on a regional basis. In response to challenges with the implementation of SCC, a SCC Provincial Resource Team was created to provide support around service delivery restructuring. In addition, the Access Initiative provided $1.771 million to SCC Steering Committees to address identified needs in the area of attitude, skills, and knowledge. A final report provided an extensive inventory of projects that were developed over the course of the transition throughout the province on a regional basis that addressed the identified areas.

Training was addressed through professional development opportunities for SCC consultants and ministry staff. Child care providers were provided with enriched professional development opportunities at yearly professional association conferences for three of the four years. The Ministry of Advanced Education, Training and Technology dispersed funds to 18 post-secondary institutions over the four years to provide augmented training opportunities in the area of inclusion for child care providers and parents. In some instances, new courses were developed and in others, extended training in the principles of SCC were piggy-backed onto existing courses in early childhood care and education. New Partnerships Training packages were developed to provide training which would enhance partnerships to assist in the development of a more inclusive system of care for children requiring extra support. All areas of training were evaluated and results were very positive regarding participation satisfaction with training and the utility of training for practice.

Opportunities to share information and network with others (parents, child care providers and staff) involved and interested in SCC were organized on two separate occasions via symposiums on SCC issues. The SCC newsletter was revised to have more community input and to share ideas developed regionally. A multiple-language poster on SCC was

created and distributed, and brochures describing SCC for parents and child care providers were developed and distributed across the province.

To facilitate transition practices and standards for SCC, a new SCC policy was developed that placed SCC within the broader scope of MCF. Competencies for SCC consultants in partnership with other early interventionists (i.e. Infant Development consultants) were developed. The SCC and Infant Development consultants provided feedback to the competencies a year after their release, confirming their usefulness as a program and self-evaluation tool. In the last year of the transition, an analysis of formal educational opportunities in post-secondary institutions in BC occurred. It indicated the need for more course development to prepare consultants for SCC practice.

Throughout the transition, materials were developed to assist with practice issues for the new service delivery framework. After two initial drafts and evaluations, the Support Guide was distributed across the province. This tool was developed to determine the support needs of a child in a child care setting and to formulate a request to the MCF for support. The Support Guide tool was accompanied by a Support Guide Handbook outlining the consultative practice required to determine support needs, as well as brochures describing the Support Guide for parents and child care providers. The Enhancing Accessibility Resource Manual was developed to assist the child care sector in making informed decisions about changes that may be needed in child care settings in order to make them accessible for children requiring extra support. This manual underwent a final revision based on practitioner feedback by the end of the transition period. SCC consultants received a compilation of interrelated materials pertinent to the practice of SCC in the form of a Resource Package. This package contained the SCC competencies, the Support Guide Handbook and the Support Guide on disk, a SCC video produced by a community using their Access Initiative funds, and other program specific materials.

There was positive feedback to the resources developed to support inclusive child care under SCC. The main provincial resources noted in this report are the Enhancing Accessibility Resource Manual, the Support Guide and the companion Support Guide Handbook. Both the Manual and the Handbook (and Support Guide) have received positive feedback for their usefulness in the area of including children requiring extra support. The SCC Consultant Resource Package was not evaluated by the release of this report.

The development of the new SCC service delivery framework was extensive and required the involvement and partnership of many ministries within government and extensive community-based planning and partnerships. The development of this framework incorporated a range of levels of practice, orientation, and interests of individuals involved in child care. The new SCC framework was premised on meeting the needs of children requiring extra support and the needs of their families.

The extent to which SCC achieved its expected outcome to create a more inclusive child care system in BC, where every parent has the same choices and every child belongs, is well supported in this report. At the start of the transition in April 1995, there were over 3,000 children who required extra support receiving some level of support from the provincial government. One third of those children were in segregated groupings or specialized settings that were not considered inclusive. Through the planning process over the four years transition period, the reduction of specialized settings was part of the SCC Implementation Plans for many communities. Some communities have continued to struggle to make the transition. However, one indicator that more communities have implemented SCC is the increased numbers of SCC programs and consultants in the province. This would imply there are less children in specialized settings and more in community-based child care settings.

Over the four year transition period to SCC there was an increase of 87% in children requiring extra support receiving services within the MCF. Based on increased numbers of SCC consultants and programs in the province, as well as access to training opportunities for the child care sector, an improvement in quality of services provided to children and families can be expected. A report (Focus Consultants, March 1999) indicated that 80% of all respondents stated that a specific child care plan had been developed with the child care provider, to meet the child's needs for extra support. In addition, 96% of parents felt the plan suited some or all of the child's extra support needs.

The capacity to provide inclusive child care through SCC has been facilitated through increased training opportunities for child care providers. Also, additional support for the child care settings, such as SCC consultants, assists child care providers to offer more inclusive child care environments. This has increased the accessibility to inclusive child care which is evident through the parents' satisfaction with the activities planned for their children. In addition, parents feel that the child care settings are a safe environment for their children requiring extra support.

This report considered the cost-effectiveness of SCC. The issues of funding and subsidy are still to be finalized and will not be fully evaluated until full implementation of SCC is in place. What is evident, is that based on numbers alone, it would appear that SCC is a more cost-effective way of providing service because more children are being served today for the same amount of money that was in place four years ago. When the transition to SCC began, there were no other proven models in place to compare with SCC. As a result, the province of BC is not aware of more cost-effective methods of achieving the same outcomes.

The obstacles to the transition process were numerous and have been well documented throughout the course of the transition process but not featured in this report. They have been, but are not limited to:[83]

- geographic barriers;
- lack of clarity about provincial initiatives;
- fear of change in the community;
- tension on the Steering Committees;
- fragility within the broader child care system;

These obstacles are the cornerstone of the inconsistencies that were remarked upon at the initiation of the transition during the 1991 review of the SNDCP services within the MSS. The research identified disparities in service across the province . . . lack of clarity in terms of the program's objectives and a lack of consistency in terms of practice issues relating to eligibility and income testing.[84] This was also recognized and responded to within the recommendations of both the *SCC Report* (1993) and the *Government Response* (1994). They have been grappled with throughout the province on a regional basis as transition planning processes proceeded. The *Final Report: Experiences and Satisfaction with SCC in Four B.C. Communities* (Focus Consultants, March 1999) provided issues and considerations for the future.[85] One issue speaks to the need for standardization of SCC beyond the basic principles. This addresses the need for program consistency, while based on the principles of SCC, programs require some similarity in practice across the province.

The issues of program consistency and clarity have still not been completely resolved. In April 1995, the province began the to develop a new SCC service delivery model. In the fall of 1996, the province created the new Ministry for Children and Families, which impacted many of the services involved in SCC through an amalgamation of several different ministries and their programs. Not only were issues being addressed within one ministry, other ministries' issues were incorporated into the mix.

An additional consideration cited in the *Final Report: Experiences and Satisfaction with SCC in Four B.C. Communities* (Focus Consultants, March 1999) questions the use of the original SNDCP budget to adequately fund the new SCC service delivery framework.

" . . . it is extremely difficult to stretch a budget originally designed for a more centralized Special Needs Day Care system to effectively serve many centres in multiple communities in a wide geographic area under SCC."[86]

However, regardless of these significant changes and challenges, the province has moved from one service delivery model to another in this four year transition period. As a result of this transition, there are more SCC consultants, more child care providers that have been trained in aspects of inclusion, and more children utilizing the SCC service in child care settings of their family's choice.

10.3 Conclusion

This summary report outlined the process of the transition to SCC and the components that were implemented to meet the intended outcome to create a more inclusive child care system for British Columbia. A summary of the activities that were implemented over the four year transition were described. The report began with a background/context of the transition to SCC during the four years of the CCSI and a brief description of the methodology. Each section that followed responded to the six summative evaluation questions pertaining to SCC. Overall, the transition to SCC and the components that were implemented during the transition met the intended outcome to create a more inclusive child care system in British Columbia where every parent has the same choices and every child belongs.

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